

09/463174

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	02-16-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	SA		3-31-00

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date			
Final	Original			
1	3	5	2	
2	01	02	03	
3	✓	✓	✓	
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8		✓	✓	
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10		✓	✓	
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23		✓	✓	
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Claim	Date			
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If more than 150 claims or 10 actions  
staple additional sheet here

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